Irvine, CA 92618

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

		THREE-WAY VALVE (Title of the Invention)		RECEIVED CENTRAL FAX CENTER	
the specification of		DEC 2 1 2005			
is attached he				DEC 2 2003	
OR	•				
X was filed on.	12/09/2003	as U.S. Application No. 10	0/735,202 <u>,</u> or	•	
International	Application No	and was ame	ended on	•	
I acknowle defined in 37 CFR became available international filing I hereby cla application(s) for pinternational applic America, and prior and have also ider certificate having a	ding the claims, as an adge the duty to disconnected the filling date of the continuation priority benefits patent, inventor's or eation which design ity benefits under 35 ntified below any U filling date before the	ewed and understand the omended by any amendment close information which is ontinuation-in-part applicated date of the prior application-in-part application. under 35 U.S.C. 119(a)-(d) plant breeder's rights certiated at least one country U.S.C. 120 of any United States or foreign application on which	referred to above. material to the paterions, material information and the nation or (f), or 365(b) of ificate(s), or 365(a) of other than the Unite States application(s), blication for patent of	entability as nation which nal or PCT any foreign of any PCT ed States of listed below or inventor's	
PRIOR APPLICAT	Application Number	Date Filed (month/date/year)	Priority Clain	ned	
agent(s) to prosect States Patent and T SEND CORRESPO	rademark Office con	DIRECT TELE (Name and To Jiawei Huang	nsact all business in PHONE CALLS TO elephone Number)	the United	
4 Venture, Suite 250		(949) 660-0761			

DECLARATION AND POWER OF ATTORNEY CONTINUED

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful, false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of the sole of this inventor. T	sai, tien-sf	i QU			
Inventor's signature TSA T 3	EN SHO	Y Date _	December	06,	2005
Citizenship: TAIWAN					
Residence and Mailing Address: NO. 3	36-16, HAIPI UNG COUNTY,			TOWN	
Full name of the second joint inventor (i	f any):				
Inventor's signature		Date		<u>.</u>	
Citizenship:					
Residence and Mailing Address:					
Full name of the third joint inventor (if a	ny):				
Inventor's signature		Date			
Citizenship:					
Residence and Mailing Address:					
Full name of the fourth joint inventor (if	any):				-
Inventor's signature	···	Date			
Citizenship:					
Residence and Mailing Address:					